



**DECLARATION AND
POWER OF ATTORNEY
FOR UTILITY OR DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing **OR** ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	20177YP
First Named Inventor	Petrukhin, et al.
COMPLETE IF KNOWN	
Application Number	
Filing Date	
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

BEST'S MACULAR DYSTROPHY GENE

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 08/23/2000 as United States Application Number or PCT International

Application Number 09/622,964 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Attorney Docket Number	Priority Claimed?	
				YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
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☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Attorney Docket Number
60/112,926 ✓	12/18/1998 ✓	20177PV2
60/075,941 ✓	02/25/1998 ✓	20177PV

Please type a plus sign (+) inside this box



Applicable use through 9/30/2000. OMB 651-0032

SUBSTITUTE for PTO/SB/01 (12-97), DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

DECLARATION AND POWER OF ATTORNEY for Utility or Design Patent Application

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U.S. Parent Application or PCT Parent Application Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
PCT/US99/03790	02/22/1999	

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☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

Place Customer Number
Bar Code Label here

Name	Registration Number	Name	Registration Number
Joseph A. Coppola	38,413	Jack L. Tribble	32,633

Direct all correspondence to: ☒ Customer Number or Bar Code Label

000210

Name	<u>Joseph A. Coppola</u>				
Address	<u>Merck & Co., Inc. - Patent Department</u>				
Address	<u>P.O. Box 2000, RY60-30</u>				
City	<u>Rahway</u>	State	<u>NJ</u>	ZIP	<u>07065-0907</u>
Country	<u>USA</u>	Telephone	<u>(732)594-6734</u>	Fax	<u>(732)594-4720</u>

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])			Family Name or Surname		
Konstantin			Petrukhin		
Inventor's Signature				Date	
Residence: City	<u>Collegeville</u>	State	<u>PA</u>	Country	<u>US</u>
Citizenship	<u>RU</u>				
Post Office Address	<u>Merck & Co., Inc., P.O. Box 2000</u>				
City	<u>Rahway</u>	State	<u>NJ</u>	ZIP	<u>07065-0907</u>

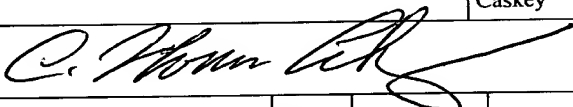
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App
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(3-97), Declaration (Additional Inventors)

DECLARATION AND POWER OF ATTORNEY

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
C. Thomas				Caskey			
Inventor's Signature				Date	10/30/2000		
Residence: City	Lansdale	State	PA	Country	US	Citizenship	US
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
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Michael				Metzker			
Inventor's Signature				Date			
Residence: City	Fort Washington	State	PA	Country	US	Citizenship	US
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
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Claes				Wadelius			
Inventor's Signature				Date			
Residence: City	Uppsala	State		Country	Sweden	Citizenship	SE
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City	Rahway	State	NJ	ZIP	07065-0907
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Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))		Family Name or Surname			
Konstantin		Petrukhin			
Inventor's Signature	<i>Petrukhin</i>			Date	4 Oct 00
Residence: City	Collegeville PA	State	PA	Country	US
				Citizenship	RU ✓
Post Office Address	Merck & Co., Inc., P.O. Box 2000				
City	Rahway	State	NJ	ZIP	07065-0907

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(3-97). Declaration (Additional Inventors)

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C. Thomas		Caskey	
Inventor's Signature	Date		
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Inventor's Signature	Date		
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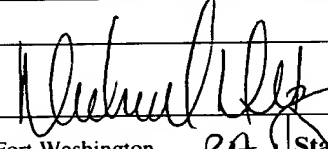
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SUBSTITUTE for PTO/S (3-97), Declaration (Additional Inventors)

DECLARATION AND POWER OF ATTORNEY

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C. Thomas				Caskey			
Inventor's Signature						Date	
Residence: City	Lansdale	State	PA	Country	US	Citizenship	US
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3-80 Michael				Metzker			
Inventor's Signature						Date	10/5/00
Residence: City	Fort Washington	State	PA	Country	US	Citizenship	US
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Country	USA	Telephone	(732)594-6734
Fax	(732)594-4720		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Konstantin		Petrukhin	
Inventor's Signature	Date		
Residence: City	Collegeville	State	PA
Country	US		Citizenship
RU			
Post Office Address	Merck & Co., Inc., P.O. Box 2000		
City	Rahway	State	NJ
ZIP	07065-0907		


☒ Additional inventors are being named on the 1 supplemental Additional Inventors(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box

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SUBSTITUTE for PTO/US (3-97), Declaration (Additional Inventors)

DECLARATION AND POWER OF ATTORNEY

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
C. Thomas				Caskey			
Inventor's Signature						Date	
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City		Rahway	State	NJ	ZIP	07065-0907	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Michael				Metzker			
Inventor's Signature						Date	
Residence: City		Fort Washington	State	PA	Country	US	Citizenship US
Post Office Address		Merck & Co., Inc., P.O. Box 2000					
City		Rahway	State	NJ	ZIP	07065-0907	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
H-01 Claes				Wadelius			
Inventor's Signature						Date October 16, 2000	
Residence: City		Upsala	State		Country	Sweden	Citizenship SE
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City		Rahway	State	NJ	ZIP	07065-0907	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City			State		Country		Citizenship
Post Office Address		Merck & Co., Inc., P.O. Box 2000					
City		Rahway	State	NJ	ZIP	07065-0907	